

Effective October 1, 2000

Application or Docket Number

69/442838

| | | SMALL ENTITY | | | | OTHER THAN | | | | | | |
|---|--|---|--------------|-------------------------------|----------------------|---|--------------|---------------|------------------------|---------|---------------------|------------------------|
| (Column 1) (Column 2) | | | | | | | | TYPE | | | SMALL | |
| TOTAL CLAIMS | | | 6 | | | | R/ | ΤE | FEE | 1 | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASI | C FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 6 minus 20= | | • 0 | | X\$ | 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | 1 minus 3 = | | · Ď | | X | 0= | | OR | X80= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | 35= | | OR | +270= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | olumn 2 | | TAL | 31/200 | . 8 | | |
| A // CLAIMS AS AMENDED - PART II | | | | | | | | IAL | 3)000 | JOH | OTHER | THAN |
| 4 | ndt H | (Column 1) | (Column 2 | | | (Column 3) | SMALL ENTITY | | | OR | SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * 7 | Minus | ** 20 | | = | X\$ | 9= | / | OR | X\$18= | |
| | Independent | * / NTATION OF MI | Minus | ***3 | F.O.L ALIA | | X4 | 0= | | OR | X80= | |
| | FIRST PRESE | NTATION OF MI | JETIPLE DEF | PENDEN | CLAIM | | +1: | 35= | | OR | +270= | |
| | | | | | | | ADDI1 | OTAL | | OR | TOTAL | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | <u>'</u> | 1 | ADDIT. FEE | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | 1 | HIGH NUM PREVIO PAID | IËST BER OUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * 7 | Minus | ** | 7 | = / | X\$ | 9= | | OR | X\$18= | |
| | Independent | * / | Minus | *** | CLAIM | = / | X4 | 0= | | OR | X80= | |
| <u> </u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | +270= | |
| | | | | | | | | OTAL . FEE | | OR | TOTAL ADDIT. FEE | |
| | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | ,, | = | X\$ | 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X4 | 0= | | OD | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | | |
| . +135= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +270= | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." | | | | | | | | | | | TOTAL ADDIT. FEE | |
| | | her Previously Pa | | | | | found in | ha ani | oronriate ho | v in co | dumn 1 | |